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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/211,942	12/15/1998	JIM A. LARSON	884.078US1	9145
21186	7590	04/13/2006		
SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH 121 S. 8TH STREET SUITE 1600 MINNEAPOLIS, MN 55402			EXAMINER OSORIO, RICARDO	
			ART UNIT 2629	PAPER NUMBER

DATE MAILED: 04/13/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No.	Applicant(s)	
	09/211,942	LARSON ET AL.	
	Examiner	Art Unit	
	RICARDO L. OSORIO	2629	

All participants (applicant, applicant's representative, PTO personnel):

(1) RICARDO L. OSORIO. (3)_____.

(2) ANNE RICHARDS. (4)_____.

Date of Interview: 29 March 2006.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.
If Yes, brief description: _____.

Claim(s) discussed: 8-16, 20, 21, AND 23-37.

Identification of prior art discussed: N/A.

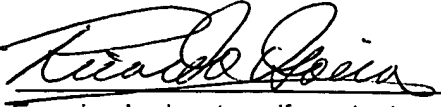
Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☒ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant's representative pointed out to examiner that only claims 12-15 were included in the previous Office Action. Examiner agreed to send a new office action that considers all the claims.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.


Examiner's signature, if required